

Complete this Application Form neatly and submit. Ensure to provide requirements listed on Page 2 of this form. For enquiries, visit your local branch or our website: <https://www.bsp.com.pg/personal-banking/loans/personal-asset-loan/> or contact Call Centre on: 320 1212 / 70301212.

Purchase Price:	K	Own Contribution/ Equity	K	Purchase price less equity	K	CIF Number: <small>For office use only</small>
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Repayment Offered:	K	Frequency	<input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly
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Purpose of Loan	<input type="checkbox"/> Outright Purchase (Land & House Package)	<input type="checkbox"/> Refinance
	<input type="checkbox"/> Renovation/ Maintenance	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> Purchase and Construction (Vacant Land + House)	

PERSONAL DETAILS

First Name:	Middle Name:	Surname:
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Date of Birth	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> De Facto <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
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Ages of Children: Child1____ Child 2____ Child 3____ Child 4 ____	Telephone or Mobile Number:	Email address:
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Country of Residence:	Country of Citizenship:
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Residential Address: (Complete Below)

Section:_____ Lot: _____	Name:_____	Name:_____
Street Name: _____	Relation:_____	Relation:_____
Suburb/Village/Settlement: _____		

Date you moved there: _____	Section:_____ Lot: _____	Section:_____ Lot:_____ Street Name:_____
	Street Name: _____	Suburb/Village/Settlement: _____
	Suburb/Village/Settlement: _____	

<input type="checkbox"/> Self	<input type="checkbox"/> Relatives	Bank: _____
<input type="checkbox"/> Provided by Employer	<input type="checkbox"/> Rental Property	

Landlord Name:	Work Address:	Account Number:
		Telephone/Mobile:

Landlord Address:	Telephone/Mobile:	Email address:
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Previous Residence: Section/Lot/Street/Suburb: (Do not complete if you have lived in your current residence for 2 years or more)

Section:_____ Lot:_____ Street Name:_____ Suburb/Village/Settlement:_____ Period at residence Years:____Months:____

If Joint Borrowing; Joint Applicant Full Name:	Date of Birth:
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EMPLOYMENT DETAILS

Applicant	Joint Applicant
Employer:	
Occupation:	
Date Commenced:	
Employer Address:	
Work Telephone & Mobile:	
Previous Employer:	
Years at Previous Employer:	

CREDIT HISTORY DECLARATION

Have you ever been declared bankrupt or had any judgement or legal proceedings entered or taken against you? *Yes ☐ No ☐

*Provide Details: _____

Have you missed two or more repayments on your current or previous BSP or other Bank loan? ☐ *Yes ☐ No

*Provide explanation letter to BSP

STATEMENT OF POSITION

A. Assets – What you own

House	Section:	Lot:		K	
Vehicle	Make:	Model:	Year:	Registration #:	K
Furniture, White Goods					K
Superannuation/Savings/Personal Items					K
BSP Account	Primary Account:	Other:			K
Total Assets					K

B. Liabilities – What you owe

BSP Personal/Home Loan		K
Loans: Other Lenders		K
Other debts, hire purchase etc.		K
Rates/Taxes/Overdraft Facility		K
Total Liabilities		K
Total Assets - Total Liabilities		K

C. Monthly Income

Gross Salary (Before Tax)	Provide 3 Current Pay slips or evidence of income if self-employed	K
Other Income (Provide Details)		K
		K
		K
Total Monthly Income		K

Monthly Expenses

Home Loan		K
Other Loan		K
Motor Vehicle Costs		K
Rent		K
Utilities		K
Other Expenses		K
General Living Expenses		K
Total Monthly Expenses		K
Total Monthly Income - Total Monthly Expenses		K

CUSTOMER REQUIREMENTS

- ☐ Fully completed and signed BSP Loan Application
☐ Employment Confirmation Letter
☐ 3 current pay slips not more than 2 months old
☐ Valid ID (Superannuation ID, Driver's License, Work Permit etc)
- ☐ Employment Contract for contracted worker (Applicable to expatriate customers or customers who are employed on contract basis)
☐ External Debt statement from other Financial Institutions
☐ Provide 3 months bank statement if part of your salary is paid to other banks

The undersigned **authorises** BSP Financial Group Limited to:

- Obtain and disclose your personal information to: (1.1) other organisations to help us to assess financial risks or to recover debt; (1.2) credit references agencies; (1.3) other members of the BSP Financial Group Limited including BSP advisors, consultants or service providers, any of the banks subsidiaries, branches, head office or representatives; (1.4) any authority, regulator or government agency in any jurisdiction as the Bank may in its absolute discretion consider appropriate, necessary or advisable; (1.5) other organisations to assist us in compliance with our obligations under our arrangements regarding the Foreign Account Tax Compliance ("FATCA").
- In the event of the undersigned's death, to pay the funeral assistance benefit to the nominated administrator specified in this form, subject to the terms and exclusions of the Consumer Credit Insurance Policy. The nominated administrator must be a Natural Person and be at least 18 years of age or over at the time of the application.
- Update your personal financial and credit information, with the information provided on this application, where the details on this application is different to the existing information held by BSP.

Confirmation that the details provided in this application represent my current information and details completed are true and accurate:

Applicant Signature:

Date:

Joint Applicant Signature:

Date:

BANK USE ONLY: Branch Officer Name:

Signature:

Date Received: